PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1062478

CLAIMS AS FILED - PART I						nn 2)	_	SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			26		(COIDI	141 2)	1	RATE	FEE	OR I I		
FOR			NUMBER	EU ED	NUMBI	ER EXTRA		BASIC FEE		00	RATE BASIC FEE	FEE 750.00
					. 😊		l I			OH		700.00
TOTAL CHARGEABLE CLAIMS			Offininus 20=		5			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	IESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART								l		,	OTHER	THAN
,		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 9	Minus	** (20	=		X\$ 9=	a se	OR	X\$18=	·
	Independent	* (Minus	***	_ ز		1	X42=		QR.	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=	
TOTAL ADDIT, FEE									OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)										J	AUDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≓	
	Independent	*	Minus	***		=]	X42≈		OR	X84=	
٩	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM] }			OR		
							L	+140=		OR	+280=	
							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	<u> </u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	##		=] [X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		3]	X42=			X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM]			OR		
* 1	f the enter in eater	mn 1 is lose than t	so onto in colo	mn O walke	. "∩" (= ∧≏!	uma 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR											TOTAL ADDIT, FEE	
		mber Previously Pa					er fou	nd in the app	ropriate box	in co	lumn 1.	